Docket No. 17672 (BOT)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Applicants: ERIC R. FIRST	Examiner:					
Serial No.: Pending	) Group Art Unit:					
Filed: Herewith	. (					
For: PRESSURE SORE TREATMENT	<u> </u>					
NON-PROVISIONAL PATENT APP	LICATION TRANSMITTAL LETTER					
Mail Stop: Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450						
Sir/Madam:						
Enclosed herewith are the following documents:						
<ul> <li>(x) Transmittal Letter - 3 pgs.</li> <li>(x) Specification (50 pages) 13 (x) Drawings (-1 - sheet)</li> <li>(x) Declaration/Power of Attornomy</li> <li>(x) Assignment with Recordation</li> <li>(x) Information Disclosure State</li> <li>(x) Return/postage paid Postcar</li> <li>(x) Express Mail Certificate No.</li> </ul>	on Cover Sheet ement with cited art d					
Dated: March 27, 2004	Stephen Bonovan Registration No. 33,433					
CERTIFICATE OF EXPRESS Merch 1 hereby certify that this Transmittal Letter and United States Postal Service on March 30, 2004 in an enveloped number EV193721249US with sufficient post Application, Commissioner for Patents, P.O. Box 1450, Alexandrical Programmer Pr	above-identified documents are being deposited with the elope as "Express Mail Post Office To Addressee" mailing tage for Express Mail addressed to Mail Stop: Patent					
Date: March 30, 2004	Susan Bartholomew Name of person mailing paper  Signature of person mailing paper					



## NEW APPLICATION TRANSMITTAL FORM

To the Commissioner for Patents:

This is a Request for filing a NON-PROVISIONAL patent application under 37 CFR 1.53(b) entitled PRESSURE SORE TREATMENT by the following named inventors:

1	Full Name of Last Name:		First Name:	Middle Name:		
		FIRST	ERIC	R.		
	Residence and	CITY:	State or Foreign Country:	Country Of Citizenship:		
	Citizenship	BOSTON	MASSACHUSETTS U.S.A.			
	Post Office Address	Post Office Address:	City:	State or Country:	Zip Code: <b>02127</b> -	
		52 N STREET	BOSTON	MASSACHUSETTS	2305	
2	Full Name of Inventor	Last Name:	First Name:	Middle Name:		
	Residence and Citizenship	CITY:	State or Foreign Country:	Country Of Citizenship:		
	Post Office Address	Post Office Address:	City:	State or Country:	Zip Code:	
3	Full Name of Inventor	Last Name:	First Name:	Middle Name:		
	Residence and Citizenship	City:	State or Foreign Country:	Country Of Citizenship	Of Citizenship:	
	Post Office Address	Post Office Address:	City:	State or Country:	Zip Code:	

- (X) The Commissioner is hereby authorized to use Deposit Account Number 01-0885 for the payment of any extension fees incurred during the prosecution of this application.
- (X) Enclosed is a specification of 50 pages, 13claims (2 pages) and an abstract (1 page).

## Oath or Declaration

- (X) Enclosed is a fully executed oath or declaration.
- ( ) Enclosed is an unsigned oath or declaration.
- (X) A self-addressed return postcard is enclosed for verification of receipt.
- (X) The filing fee is calculated below:

FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE
Basic Fee (Large entity)		·	\$770.00	\$770.00
Total Claims 13 min	us 20 =	-0-	\$18.00	\$0.00
Independent Claims 5 min	us 3 =	-2-	\$86.00	\$172.00
If application contains any multiple dependent claims, then add			\$290.00\$	0.00
<del></del>		TOTAL FILING FEE		\$942.00

- (X) The Commissioner is hereby authorized to charge the filing fee and excess claim fees (including multiple dependent claim fee) as stated above to Deposit Account No. 01-0885. If this amount is incorrect, or for payment of any other fees that may be incurred as a result of this communication please use said Deposit Account. A duplicate copy of this sheet is enclosed for that purpose.
- (X) An Assignment with the Recordation Cover Sheet, bestowing all interest in this application to Allergan, Inc., is enclosed.
- (x) New drawing(s) are enclosed in -1- sheet.
- ( ) A Statement Pursuant to 37 CFR §1.821(f) and a labeled diskette containing the computer readable sequence listing is enclosed.
- ( ) A Statement Pursuant to 37 CFR §1.821(e), stating that the paper copy and the computer readable form are identical is filed herewith.
- ( ) A properly labeled computer readable form of the Sequence Listing accompanies this Application.
- (x) The Power of Attorney in this application is to Stephen Donovan, Registration Number 33,433.
- (x) The Power of Attorney appears in the Combined Declaration and Power of Attorney, filed herewith.

Please address all future communications to:

STEPHEN DONOVAN Registration No. 33,433 ALLERGAN, INC. 2525 Dupont Drive, T2-7H Irvine, CA 92612

Tel: 714-246-4026

Fax: 714-246-4249

Respectfully submitted,

Date: March 21, 2004

Stephen Donovan Registration No. 33,433 Attorney of Record